PAGE 1 / 65

Image# 12970211178

#### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF TOO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
AMERICAN ASSOCIATION OF	NEUROLOGICAL SURG	EONS POLITICAL ACTION CO	MMITTEE (NEUROSURGERYPAC)
ADDRESS (number and street)	725 Fiftheenth St., NW Su	ite 500	
Check if different than previously	Washington		DC   20005
reported. (ACĆ)	vvasinigion		2003
2. FEC IDENTIFICATION NUM	<b>IBER</b> ▼ C	ITY 🛦	STATE ▲ ZIP CODE ▲
C C00413955		IS THIS REPORT X (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report	eb 20 (M2) May 20 (M	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	ar 20 (M3) Jun 20 (M	
April 15	Ap	or 20 (M4) Jul 20 (M7	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (Q3)		M M / D D	/ Y Y Y Y in the
X January 31 Year-End Report (YE)	Elect	tion on	State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	tion on	in the State of
5. Covering Period 07	01 / 2011	through 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	Report and to the best of	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Dr. Robert E. Harbaugh		
Signature of Treasurer Dr. Rob	eert E. Harbaugh	[Electronically Filed]	Date 01 31 / 2012
NOTE: Submission of false, erroneo	us, or incomplete informati	on may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) 2011 Report Covering the Period: 2011 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 79487.65 January 1. 2011 (b) Cash on Hand at 119040.51 Beginning of Reporting Period..... 251075.00 96575.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 215615.51 330562.65 6(a) and 6(c) for Column B)..... 92636.25 207583.39 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 122979.26 122979.26 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

-ederal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)

Re	port Covering the Period: From: 07		12 31 2011
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees		
	(i) Itemized (use Schedule A)	92850.00	244200.00
	(ii) Unitemized(iii) TOTAL (add	3725.00	6875.00
	Lines 11(a)(i) and (ii)	96575.00	251075.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	0.00	0.00
12.	Totals to Line 33, page 5)  Transfers From Affiliated/Other	96575.00	251075.00
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
15.	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16.	(Carry Totals to Line 37, page 5)	0.00	0.00
	Political Committees Other Federal Receipts	0.00	0.00
18.	(Dividends, Interest, etc.)Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	96575.00	251075.00
	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	96575.00	251075.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period					
Operating Expenditures:  (a) Allocated Federal/Non-Federal		Calendar Year-to-Date				
Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) N 5 1 10	0.00	0.00				
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00				
(b) Other Federal Operating  Expenditures	22636.25	25583.39				
(c) Total Operating Expenditures	22355.25	25050.50				
(add 21(a)(i), (a)(ii), and (b))▶	22636.25	25583.39				
Transfers to Affiliated/Other Party						
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees and Other Political Committees	70000.00	182000.00				
Independent Expenditures						
(use Schedule E)	0.00	0.00				
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00					
(use Schedule F)	0.00	0.00				
Long Denominate Made	0.00	0.00				
Loan Repayments Made	7	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other						
Than Political Committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	0.00	0.00				
Other Disbursements	0.00	0.00				
		, , , , , , , , , , , , , , , , , , , ,				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(i) I coordi chiare						
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely						
With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add	0.00	0.00				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	92636.25	207502 20				
20, 21, 20, 20, 21, 20(a), 20 and 00(0))	32030.23	207583.39				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	92636.25	207583.39				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	96575.00	251075.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96575.00	251075.00		
S. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	22636.25	25583.39		
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	22636.25	25583.39		

	FOF	R LINE	NU	IMBER	:	PAGE	6	OF	65
Use separate schedule(s)	(che	eck only	or or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16	Г	$\Box_{17}$

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Bizhan Aarabi Date of Receipt Mailing Address 22 S. Greene St. Ste S12D 07 2011 City State Zip Code Transaction ID: SA11AI.5843 MD 21201-1595 **Baltimore** Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Contribution Name of Employer Occupation Univ of Maryland Med Ctr Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. M. Samy Abdou Date of Receipt Mailing Address 4647 Zion Ave. Kaiser Hospital/Neurosurgery 07 14 2011 City State Zip Code Transaction ID: SA11AI.5845 CA San Diego 92120 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Contribution Name of Employer Occupation Kaiser Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Saleem I. Abdulrauf Date of Receipt Mailing Address 7520 Buckingham Dr. 28 07 2011 Apt. 1E City State Zip Code Transaction ID: SA11AI.5948 MO St. Louis 63105-2850 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation St. Louis University Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) John M. Abrahams Date of Receipt Mailing Address 244 Westchester Ave. Ste 310 80 08 2011 City State Zip Code Transaction ID: SA11AI.5972 NY White Plains 10604 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation Neurosurgeons of New York Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Mark E. Anderson Date of Receipt Mailing Address 16300 Sand Canyon Ave. Ste. 1005 07 14 2011 City State Zip Code Transaction ID: SA11AI.5854 CA Irvine 92618-3710 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Lisa Sharon Apfel Date of Receipt Mailing Address 3 Riverside Cir. 09 80 2011 City State Zip Code Transaction ID: SA11AI.6006 Roanoke VA 24016 Amount of Each Receipt this Period FEC ID number of contributing C 550.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 2050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Alan J. Appley Date of Receipt Mailing Address 155 Hospital Dr., Ste. 100 2011 06 City Zip Code State Transaction ID: SA11AI.6061 Lafayette LA 70503 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Adam S. Arthur Date of Receipt Mailing Address 6325 Humphreys Blvd. Semmes-Murphey Clinic 07 2011 14 City State Zip Code Transaction ID: SA11AI.5856 TN Memphis 38120-2300 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Contribution Name of Employer Occupation Semmes-Murphey Clinic Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Michael J. Ayad Date of Receipt Mailing Address MCN T-4224 Vanderbilt Univ. 07 15 2011 MC Neurosurgery City State Zip Code Transaction ID: SA11AI.5947 TN Nashville 37232 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation Vanderbilt University Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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65 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Adeleke Badejo Date of Receipt Mailing Address 3219 Central Ave., Ste. 103 Nebraska Neurosurgery/Spine Clinic 2011 08 08 City Zip Code State Transaction ID: SA11AI.5976 NE Kearney 68847 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Nebraska Neurosurgery/Spine Cl Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Steven Joseph Beer Date of Receipt Mailing Address 1950 Bluegrass Circle, Ste. 170 80 09 2011 City State Zip Code Transaction ID: SA11AI.6008 WY Cheyenne 82009 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation Wyoming Spine&Neurosurgery Ass Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Aldo Francisco Berti Date of Receipt Mailing Address 7600 S. Red Rd., Ste. 304 09 02 2011 Miami Neurosurgical Center City Zip Code State Transaction ID: SA11AI.6063 FL South Miami 33143 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 12 OF 65 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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	FOF	LINE	NU	MBER	:	PAGE	13 OF	-	65
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Michael Joseph Caron Date of Receipt Mailing Address 120 Spalding DR Ste. 207 2011 07 City State Zip Code Transaction ID: SA11AI.5860 Naperville IL 60540 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Benjamin S. Carson Date of Receipt Mailing Address 600 N. Wolfe St. Harvey 811 08 25 2011 City State Zip Code Transaction ID: SA11AI.6056 MD **Baltimore** 21287-0001 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation John Hopkins University Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Christopher J. Cascino Date of Receipt Mailing Address 901 Center St., Ste. 305 09 80 2011 Elgin Barrington Neurosurgery SC City Zip Code State Transaction ID: SA11AI.6013 IL Elgin 60120 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. contribution Name of Employer Occupation Elgin Barrington Neurosurgery Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:   PAGE 14 OF	= 65
Use separate schedule(s)	(check only one)	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. John Richard Cassidy Date of Receipt Mailing Address 842 Sunset Lake Blvd., Ste. 302 09 2011 City Zip Code State Transaction ID: SA11AI.6015 FL Venice 34292 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation Neurosurgical Assoc. Cassidy Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph S. Cheng Date of Receipt Mailing Address 6541 Radcliff Dr. 09 26 2011 City State Zip Code Transaction ID: SA11AI.6073 Nashville TN 37221 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Vanderbilt Univ Med Center Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chaim B. Colen Date of Receipt Mailing Address 19745 Blossom Ln. 10 11 2011 State Zip Code Transaction ID: SA11AI.6104 MI Grosse Pointe Wood 48236 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation University Health Center Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. E. Sander Connolly, Jr. Date of Receipt Mailing Address 710 W. 168th ST, Rm. 435 New York Neurological Institute 2011 10 City Zip Code State Transaction ID: SA11AI.6109 NY New York 10032 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Shon W. Cook Date of Receipt Mailing Address 2412 Palmer Circle 07 2011 14 City State Zip Code Transaction ID: SA11AI.5863 OK Norman 73069-6301 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Gregory Corradino Date of Receipt Mailing Address 999 Executive Park Blvd., Ste. 102 80 80 2011 City Zip Code State Transaction ID: SA11AI.5981 ΤN Kingsport 37660 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Jeffrey W. Cozzens Date of Receipt Mailing Address PO Box 19680 80 09 2011 City State Zip Code Transaction ID: SA11AI.6016 Springfield IL 62794 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation SIU Surgical Clinic Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel J. Curry Date of Receipt Mailing Address 6621 Fannin 08 09 2011 City State Zip Code Transaction ID: SA11AI.6017 TX Houston 77030 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Texas Childrens Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Victor R. Da Silva Date of Receipt Mailing Address 3000 N. Hwy. A1A 2011 07 14 Unit 7B City State Zip Code Transaction ID: SA11AI.5869 FL Fort Pierce 34949 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. contribution Name of Employer Occupation Lawnwood Neurosurgery Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 17 OF 65

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUR (NEUROSURGERYPAC)	OLOGICAL SURGEONS POLITICAL AC	CTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Gary A. Dix  Mailing Address 2002 Medical Pkwy. Ste 430  City  Annapolis  FEC ID number of contributing federal political committee.  Name of Employer  Maryland Brain & Spine LLC  Receipt For:  Primary General Other (specify)	State Zip Code MD 21401  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / 28 2011  Transaction ID: SA11AI.5953  Amount of Each Receipt this Period  500.00  contribution
Full Name (Last, First, Middle Initial) Dr. Eugene James Dolan  Mailing Address 2825 8th Ave., North Billings Clinic  City Billings  FEC ID number of contributing federal political committee.  Name of Employer Billings Clinic  Receipt For: Primary General Other (specify)	State Zip Code MT 59101  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  07 28 2011  Transaction ID: SA11AI.5956  Amount of Each Receipt this Period  500.00  contribution
Full Name (Last, First, Middle Initial)  Dr. Michael Dorsen  Mailing Address 501 N. Graham St. Ste. 330B  City Portland  FEC ID number of contributing federal political committee.  Name of Employer  Legacy Neurological Surgery Cl  Receipt For: Primary General Other (specify)	State Zip Code OR 97227  C Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  07
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Bruce L. Ehni Date of Receipt Mailing Address 2532 Bluebonnet Blvd. 2011 07 City State Zip Code Transaction ID: SA11AI.5873 TX Houston 77030 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation VA Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Richard G. Ellenbogen Date of Receipt Mailing Address 5706 63rd Ave. N.E. 14 07 2011 City State Zip Code Transaction ID: SA11AI.5874 WA Seattle 98105 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. J. Paul Elliott Date of Receipt Mailing Address 499 E. Hampden Ave. 09 80 2011 Ste 220 City State Zip Code Transaction ID: SA11AI.6018 CO Englewood 80113-2792 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 19 OF 65

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	Statements may not be sold or used by any penter name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUF (NEUROSURGERYPAC)	ROLOGICAL SURGEONS POLITICAL AC	CTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Thomas Leon Ellis  Mailing Address Medical Center Blvd.  Wake Forest Univ./Neurosur  City  Winston Salem  FEC ID number of contributing federal political committee.  Name of Employer  Wake Forest University  Receipt For:  Primary  General  Other (specify)	State Zip Code NC 27157  C  Occupation Neurosurgeon  Aggregate Year-to-Date   250.00	Date of Receipt  O7 28 2011  Transaction ID: SA11AI.5958  Amount of Each Receipt this Period  250.00  contribution
Full Name (Last, First, Middle Initial)  Dr. Joel L. Falik  Mailing Address 7257-B Hanover Pkwy.  City Greenbelt  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 20770-3612  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  O7 14 2011  Transaction ID: SA11AI.5875  Amount of Each Receipt this Period  1000.00  contribution
Full Name (Last, First, Middle Initial)  Dr. Tony F. Feuerman  Mailing Address 16133 Ventura Blvd. Ste 110  City Encino  FEC ID number of contributing federal political committee.  Name of Employer  Self Receipt For:  Primary General Other (specify)	State Zip Code CA 91436  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  09 15 2011  Transaction ID: SA11AI.6069  Amount of Each Receipt this Period  500.00  contribution
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number	er only)	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Kenneth A. Follett Date of Receipt Mailing Address 982035 Nebraska Medical Center 80 08 2011 City Zip Code State Transaction ID: SA11AI.5982 NE Omaha 68198 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation Univ of Nebraska Med Ctr Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Michael H. Freed Date of Receipt Mailing Address 800 Washington St. Linden Bldg 1st Floor 07 28 2011 City State Zip Code Transaction ID: SA11AI.5959 MA 02062 Norwood Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. contribution Name of Employer Occupation Neurosurgical Consultants Inc. Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Richard E. George Date of Receipt Mailing Address 4515 Marsha Sharp Fwy. 10 12 2011 City State Zip Code Transaction ID: SA11AI.6112 TX Lubbock 79407 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Grace Clinic Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 21 OF 65

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Any information copied from such Reports and S or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUR (NEUROSURGERYPAC)	OLOGICAL SURGEONS POLITICAL AC	TION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Christopher C. Getch  Mailing Address 676 N. St. Clair; Ste 2210  Dept of Neurosurgery  City  Chicago  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	State Zip Code IL 60611  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  10 12 2011  Transaction ID: SA11AI.6081  Amount of Each Receipt this Period  500.00  contribution
Full Name (Last, First, Middle Initial)  Abdi S. Ghodsi  Mailing Address ste. 300  1212 Garfield Ave.  City  Parkersburg  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	State Zip Code WV 26101  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  07 15 2011  Transaction ID: SA11AI.5943  Amount of Each Receipt this Period  500.00  contribution
Full Name (Last, First, Middle Initial)  Dr. Holly S. Gilmer  Mailing Address 29275 Northwestern Hwy.  Ste 100  City  Southfield  FEC ID number of contributing federal political committee.  Name of Employer  Beaumont Children's Hospital  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code MI 48034  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  08
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2000.00
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	NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEURO (NEUROSURGERYPAC)	DLOGICAL	SURGEONS POLITICAL AC	TION COMMITTEE							
Α.	Full Name (Last, First, Middle Initial) Dr. Jordan C. Grabel			Date of Receipt							
	Mailing Address 1411 N. Flagler Dr. Ste 5900			09 06 2011							
	West Palm Beach	State FL	Zip Code 33401		action ID:			d			
	FEC ID number of contributing federal political committee.	С				-	75	0.00			
	Name of Employer Self	Occupation Neurosurge	on	contribut	ion						
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 750.00								
В.	Full Name (Last, First, Middle Initial) Dr. James S. Harrop			Date of	Receipt						
	Mailing Address 909 Walnut St. 2nd Fl.			10	/ 11	) / Y	2011	Y			
	City Philadelphia	State PA	Zip Code 19107		action ID: of Each F			d			
	FEC ID number of contributing federal political committee.	С				- 7	100	0.00			
	Name of Employer Thomas Jefferson Univ Hospital	Occupation Neurosurge	on	contributi	ion						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
<del>С</del> .	Full Name (Last, First, Middle Initial) Carl B. Heilman			Date of	Receipt						
	Mailing Address 800 Washington St. Box 178 Tufts-New England Med. Ctr.			м = м 07	14		2011	Y			
	City Boston	State MA	Zip Code 02111-1526		action ID :			d			
	FEC ID number of contributing federal political committee.	С		contribut	tion		50	0.00			
	Name of Employer	Occupation		Continbut	lion						
	self Receipt For:	neurosurge									
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Peter O. Holliday III Date of Receipt Mailing Address 420 Charter Blvd. Ste 402 08 2011 08 City Zip Code State Transaction ID: SA11AI.5991 GA Macon 31210 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Judy Huang Date of Receipt Mailing Address 600 N. Wolfe St. Meyer 8-181C 09 26 2011 City State Zip Code Transaction ID: SA11AI.6072 MD **Baltimore** 21287 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Johns Hopkins University Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. David F. Jimenez Date of Receipt Mailing Address University of Texas/Neurosurgery M = M 2011 7703 Floyd Curl Dr. Box 7843 10 12 City Zip Code State Transaction ID: SA11AI.6082 TX San Antonio 78229-3900 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Jeff Leland Date of Receipt Mailing Address 4760 Red Bank RD Ste. 222 07 2011 City State Zip Code Transaction ID: SA11AI.5894 OH Cincinnati 45227-1549 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Blue Chip Surgical Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Elad I. Levy Date of Receipt Mailing Address 3 Gates Cir. Neurosurgery 08 80 2011 City State Zip Code Transaction ID: SA11AI.5993 Buffalo NY 14209 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation University of Buffalo Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Darren S. Lovick Date of Receipt Mailing Address 3901 Rainbow Blvd. MS3021 2011 Univ. of Kansas MC/Neurosurgery 07 14 City Zip Code State Transaction ID: SA11AI.5900 KS Kansas City 66160 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation University of Kansas Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Christopher B. Michael Date of Receipt Mailing Address 3600 Gaston Ave. Barnett Tower #907 09 2011 08 City State Zip Code Transaction ID: SA11AI.6033 TX Dallas 75246 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Abraham Mintz Date of Receipt Mailing Address 5520 Park Ave., Ste. 210 08 09 2011 City State Zip Code Transaction ID: SA11AI.6035 Trumbull CT 06611 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. James A. Moody Date of Receipt Mailing Address 1411 N. Beckley Ave. Pavillion M = M 10 12 2011 Ste. 152 City State Zip Code Transaction ID: SA11AI.6083 TX **Dallas** 75203 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation Methodist Brain & Spine Inst Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) James A. Moody Date of Receipt Mailing Address 1411 N. Beckley Ave. Pavillion Ste. 152 2011 12 22 City State Zip Code Transaction ID: SA11AI.6118 TX Dallas 75203 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation Methodist Brain & Spine Inst Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Praveen V. Mummaneni Date of Receipt Mailing Address 505 Parnassus Ave. M-779 Box 0112 14 07 2011 City State Zip Code Transaction ID: SA11AI.5901 San Francisco CA 94143 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. contribution Name of Employer Occupation **UCSF** Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Rhett Blake Murray Date of Receipt Mailing Address 201 Governors Dr. 1st Fl. 80 80 2011 City State Zip Code Transaction ID: SA11AI.5996 ΑL Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation Spine & Neurosurgery Center Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Alessandro Olivi Date of Receipt Mailing Address 600 N. Wolfe ST John Hopkins Hosp./Phipps 100 2011 07 28 City Zip Code State Transaction ID: SA11AI.5965 MD **Baltimore** 21287 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation John Hopkins Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Kimberly Ann Page Date of Receipt Mailing Address 2420 Sonoma St., Ste. A 08 09 2011 City State Zip Code Transaction ID: SA11AI.6037 CA Redding 96001 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation North Valley Neurosurgery Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mick J. Perez-Cruet Date of Receipt Mailing Address 1070 Timberlake Dr. 28 07 2011 City State Zip Code Transaction ID: SA11AI.5966 MI Bloomfield 48302 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation University Neurosurgical Assoc Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Henry Ruiz Date of Receipt Mailing Address 300 Medical Center DR, Ste. 303 2011 10 City Zip Code State Transaction ID: SA11AI.6086 Gadsden AL 35903 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mari Rutka Date of Receipt Mailing Address 149 Mossgrove Tr. 12 22 2011 City State Zip Code Transaction ID: SA11AI.6122 North York ZZ Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Toronto School Board Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Lenard J. Rutkowski Date of Receipt Mailing Address 1314 19th AVE 28 07 2011 Meridian Neurosurgery Zip Code City State Transaction ID: SA11AI.5969 MS Meridian 39301 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. contribution Name of Employer Occupation Meridian Neurosurgery Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Larry D. Tice Date of Receipt Mailing Address 551 Kokopelli Blvd, Unit I 2011 10 City State Zip Code Transaction ID: SA11AI.6111 CO Fruita 81521 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. D. Roxanne Todor Date of Receipt Mailing Address 1400 Pelham Pkwy. S. Neurosurgery Office Ste. 3W5 08 80 2011 City State Zip Code Transaction ID: SA11AI.6004 NY **Bronx** 10461 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. contribution Name of Employer Occupation Jacoby Medical Center Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. John R. Tompkins Date of Receipt Mailing Address 4708 Alliance Blvd. Ste. 475 M = M 10 12 2011 City Zip Code State Transaction ID: SA11AI.6092 TX Plano 75093 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

## SCHEDULE A (FEC Form 3X)

	FOR LINE NUMBER: PAGE 43 OF	65								
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NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUF (NEUROSURGERYPAC)	ROLOGICAL SURGEONS POLITICAL A	ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  G. E. Vates  Mailing Address Univ. of Rochester MC/Neur 601 Elmwood Ave. Box 670  City Rochester  FEC ID number of contributing federal political committee.  Name of Employer  URMC  Receipt For: Primary General Other (specify)   Full Name (Last First Middle Initial)	State Zip Code NY 14642  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼	Date of Receipt  10 12 2011  Transaction ID: SA11AI.6093  Amount of Each Receipt this Period  750.00  contribution
Full Name (Last, First, Middle Initial)  Dr. Philip Andrew Villanueva  Mailing Address 30 Hope Dr. EC110  City Hershey  FEC ID number of contributing federal political committee.  Name of Employer Penn State Hershey  Receipt For:  Primary  General  Other (specify)	State Zip Code PA 17033  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  500.00	Date of Receipt  07 14 2011  Transaction ID : SA11AI.5923  Amount of Each Receipt this Period  500.00  contribution
Full Name (Last, First, Middle Initial) Rand M. Voorhies  Mailing Address 1139 Third St.  City New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For: Primary Other (specify)	State Zip Code LA 70130  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼  1500.00	Date of Receipt  07 14 2011  Transaction ID: SA11Al.5924  Amount of Each Receipt this Period  1500.00  contribution
SUBTOTAL of Receipts This Page (optional)		2750.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Michael Y. Wang Date of Receipt Mailing Address 1095 NW 14th Terrace University of Miami 2011 10 City State Zip Code Transaction ID: SA11AI.6102 FL Miami 33136 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Clarence B. Watridge Date of Receipt Mailing Address 6325 Humphreys Blvd 10 12 2011 City State Zip Code Transaction ID: SA11AI.6094 TN Memphis 38120 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation Semmes Murphey Clinic Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Monica C. Wehby Date of Receipt Mailing Address 501 N. Graham ST, Ste. 315 10 12 2011 Microneurosurgical Consultants PC City Zip Code State Transaction ID: SA11AI.6095 OR Portland 97227 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. contribution Name of Employer Occupation Legacy Emanuel Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Mark A. Weiner Date of Receipt Mailing Address 2600 Tuscarawas ST., W. Ste. 520 07 2011 City State Zip Code Transaction ID: SA11AI.5930 OH Canton 44708 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Aultman Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Blake G. Welling Date of Receipt Mailing Address 4403 Harrison Blvd, Ste 1815 14 07 2011 City State Zip Code Transaction ID: SA11AI.5933 UT Ogden 84403 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. contribution Name of Employer Occupation **Utah Spine** Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. John A. Welshofer Date of Receipt Mailing Address 225 Baldwin Ave. 09 15 2011 City State Zip Code Transaction ID: SA11AI.6071 NC Charlotte 28204 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation Carolina Neurosurgery and Spin Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) Dr. Daniel Vernon White Date of Receipt Mailing Address 4810 Sussex Dr. 08 09 2011 City State Zip Code Transaction ID: SA11AI.6053 CA San Diego 92116 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Donald M. Whiting Date of Receipt Mailing Address 380 W. Chestnut St. 14 07 2011 City State Zip Code Transaction ID: SA11AI.5934 Washington PA 15301 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation Allegheny General Hospital Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Diana E. Wilson Date of Receipt Mailing Address 1300 W Terrell Ave., Ste 300 07 14 2011 City State Zip Code Transaction ID: SA11AI.5937 TX Fort Worth 76104 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Texas Health Physicians Group Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC) Full Name (Last, First, Middle Initial) John A. Wilson Date of Receipt Mailing Address Medical Center Dr./Neurosurgery Wake Forest University 2011 10 City Zip Code State Transaction ID: SA11AI.6103 NC Winston Salem 27157 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. contribution Name of Employer Occupation Self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher E. Wolfla Date of Receipt Mailing Address 9200 W. Wisconsin Ave. 10 2011 11 City State Zip Code Transaction ID: SA11AI.6106 WI Milwaukee 53226 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. contribution Name of Employer Occupation Medical College of Wisconsin Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Ravi Yalamanchili Date of Receipt Mailing Address 141 Thomas Johnson Dr Ste 200 07 14 2011 City State Zip Code Transaction ID: SA11AI.5939 MD Frederick 21702 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. contribution Name of Employer Occupation self Neurosurgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUR (NEUROSURGERYPAC)	OLOGICAL SURGEONS POLITICAL A	CTION COMMITTEE
Full Name (Last, First, Middle Initial)  David D. Yeh  Mailing Address 6961 Glenview Dr.  City San Jose  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary General Other (specify)	State Zip Code CA 95120  C  Occupation Neurosurgeon  Aggregate Year-to-Date ▼	Date of Receipt  08 09 2011  Transaction ID: SA11AI.6054  Amount of Each Receipt this Period  1000.00  contribution
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 51 OF 6					
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A. American Express			Date of Disburseme	ent			
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,	State Zip Code		Transaction ID : S	SR21R 6178			
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SCHEDULE B (FEC Form 3X)			3X)	FOR				LINE NUMBER:				PAGE 52 OF 69			
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Any information copied from such Reports and Statements may not be soil or used by any person for the purpose of solicing contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)  Full Name (Last, First, Middle Initial)  A. Inc PayPal  Mailing Address 4100 Solutions Center 774100  City State Zip Code Candidate Name  Cardidate Name  Office Sought: House Primary General  Primary General  Other (specify) ▼  State: District  Full Name (Last, First, Middle Initial)  B. Moneris Solutions  Mailing Address 700 East Lake Cook Road  City State Zip Code IL 6089  Furpose of Disbursement  CC Fees  Candidate Name  Category' Type  Office Sought: House President Other (specify) ▼  State: District  Full Name (Last, First, Middle Initial)  B. Moneris Solutions  Mailing Address 700 East Lake Cook Road  City State Zip Code IL 6089  Furpose of Disbursement  CC Fees  Candidate Name  Category' Type  Office Sought: House Disbursement For: Senate Primary General  Other (specify) ▼  Transaction ID: SB218.6194  Amount of Each Disbursement this Period  Category' Type  Office Sought: House Disbursement For: Senate Primary General  Other (specify) ▼  Transaction ID: SB218.6194  Amount of Each Disbursement this Period  Category' Type  Office Sought: House Disbursement For: Category' Type	nly one)
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Fall)  AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)  Full Name (Last, First, Middle Initial)  A Inc PayPal  Meiling Address 4100 Solutions Center 77/4100  City State Zip Code Chicago IL 60677  Purpose of Disbursement CC Fees  Candidate Name  Olisbursement For: Senate President Disbursement For: Office Sought: House Disbursement CC Fees  Candidate Name  Office Sought: President Disbursement CC Fees  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State Zip Code IL 60089  Transaction ID : SB218.6193  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) C: Moneris Solutions  Mailing Address 700 East Lake Cook Road  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) C: Moneris Solutions  Mailing Address 700 East Lake Cook Road  City State Zip Code Buffalo Grove IL 60089  Furpose of Disbursement C Fees  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID : SB218.6182  Amount of Each Disbursement Cores Code Cardidate Name  Office Sought: House Disbursement For: Office Sought:	
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	Mailing Address 700 East Lake Cook Road					08		31	J	2011	_	
	City	State	Zip Code									
	Buffalo Grove	IL	60089			Trans	sactior	۱ ID : S	SB21B.6	183		
	Purpose of Disbursement				_	-						
	CC Fees			00		Amoun	nt of Ea	ach Dis	sburseme	ent this	Perio	d
	Candidate Name			Categ						42	2.00	П
	Office Sought: House Disbursen	nent For:		Тур	e		7		- 7	تَـــــ		-
		Primary	General									
		Other (spe										
	State: District:	` '	<i>√</i>									
	Full Name (Last, First, Middle Initial)											
В.	Moneris Solutions					Date o	of Disbu	ırseme	∍nt			
						M = M	/	D D	/ Y	YY	Υ	
	Mailing Address 700 East Lake Cook Road					09	4	30		2011	_	
	City	State	Zip Code									
	Buffalo Grove	IL	60089			Trans	sactior	າ ID : S	SB21B.6	184		
	Purpose of Disbursement CC Fees			_	_							
				00	1	Amoun	nt of Ea	ach Dis	sburseme	ent this	Perio	d
	Candidate Name			Categ						15	4.70	П
	Office Sought: House Disbursem	nent For:		Тур	e 	-	,		,			
		Primary	General									
		Other (spe	cify) 🔻									
	State: District:											
	Full Name (Last, First, Middle Initial)											
C.	Moneris Solutions					Date o	of Disbu	ırseme	∍nt			
	Mailing Address 700 F at 1 A O A B					M = M	/	D   D	/ Y	2011	Υ	
	Mailing Address 700 East Lake Cook Road					10		31	, L	2011		
	City	State	Zip Code			<b>T</b>		- ID 6		405		
	Buffalo Grove	IL	60089			Irans	saction	יטו ו : 5	SB21B.6 <sup>-</sup>	185		
	Purpose of Disbursement CC Fees											
	Candidate Name			00		Amoun	nt of Ea	ach Dis	sburseme	ent this	Perio	d
	Candidate Name			Categ Typ						22	6.70	П
	Office Sought: House Disbursen	nent For:		тур			,		- 7			-
		Primary	General									
	President	Other (spe	cify) 🔻									
	State: District:											
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5	SUBTOTAL of Disbursements This Page (optional)				▶					80	3.40	
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 56 OF					
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)				
	Detailed Summary Page	X 21b	22 23 28a 28b	24 25 26 28c 29 30b			
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Any information copied from such Reports and Stater or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)  AMERICAN ASSOCIATION OF NEUROLOGIC	CAL SURGEONS POLITIC	AL ACTION CO	OMMITTEE (NEURO	OSURGERYPAC)			
Full Name (Last, First, Middle Initial)							
A. Moneris Solutions			Date of Disbursen				
Mailing Address 700 East Lake Cook Road			11 30	_2011			
,	State Zip Code		Transaction ID :	SR21R 6186			
Buffalo Grove	IL 60089		Transaction ib .	35215.0100			
Purpose of Disbursement CC Fees		001	Amount of Each [	Disbursement this Period			
Candidate Name		Category/ Type		31.95			
Office Sought: House Disburser  Senate President	nent For: Primary General Other (specify)	7,50		,			
State: District:							
Full Name (Last, First, Middle Initial)  B. Moneris Solutions			Date of Disbursen	nent			
			M = M / D = E	) / Y Y Y Y Y			
Mailing Address 700 East Lake Cook Road			12 31	2011			
Buffalo Grove	State Zip Code IL 60089		Transaction ID :	SB21B.6187			
Purpose of Disbursement CC Fees		001	Amount of Each [	Disbursement this Period			
Candidate Name		Category/ Type		62.22			
Office Sought: House Disburser  Senate President	nent For:  Primary General  Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)  C.			Date of Disbursen	nent			
Mailing Address			M = M / D = 0	/ Y Y Y Y			
City	State Zip Code						
Purpose of Disbursement							
Candidate Name		Category/ Type	Amount of Each [	Disbursement this Period			
Office Sought:    House   Disburser	nent For: Primary General Other (specify)		7				
District.							
SUBTOTAL of Disbursements This Page (optional)		·····		94.17			
TOTAL This Period (last page this line number only)				22636.25			

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER:		PAGE 57	OF
ITEMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(check only	one)		. —	
		ummary Page	21b	22			
[	<u> </u>		27	28a	28b 28		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)	no ana addres	30 or arry pointe	our committee to	JOHOIT GOTHIN		34011 001111	miliou.
AMERICAN ASSOCIATION OF NEUROLOGIC	CAL SURGEO	ONS POLITICA	AL ACTION CO	MMITTEE (	NEUROSUR	GERYPA	(C)
//	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,				,
Full Name (Last, First, Middle Initial)							
A. BENISHEK FOR CONGRESS				Date of D	isbursement		
				M = M	/ D D /	Y	
Mailing Address 802 Pentoga Trail				12	08	2011	
City	State	Zip Code					
Crystal Falls		49920		Transac	tion ID : SB23	3.6127	
Purpose of Disbursement							
Contribution			011	Amount o	f Each Disbur	sement thi	is Perio
Candidate Name			Category/			47	200 00
BENISHEK FOR CONGRESS			Type		7	10	00.00
	ment For: 20	_					
	Primary	General					
State: MI District: 01	Other (specif	y) <b>▼</b>					
Full Name (Last, First, Middle Initial)							
B. BILL CASSIDY FOR CONGRESS				Date of D	isbursement		
DILL OAGSIDT TON CONGRESS				M M		Y	y v
Mailing Address 8550 United Plaza Blvd.				09	22	2011	
Suite 1001							
,		Zip Code		Transac	tion ID : SB2	3.6150	
Baton Rouge Purpose of Disbursement	LA	70809					
Contribution			011	Amount o	f Each Disbur	sement thi	is Peric
Candidate Name					Zuoii Biobui		0 1 0110
			Category/ Type			50	000.00
Office Sought:  House  Disburser	ment For: 20	112	71		,	,	
Senate	Primary	General					
President	Other (specify	y) <b>▼</b>					
State: LA District: 06							
Full Name (Last, First, Middle Initial)				D=4 - ( D	:_l		
C. FRIENDS OF CLIFF STEARNS					isbursement		
Mailing Address PO BOX 308				08	04	2011	
ag / dd/000   O DO/ 300				55	Ÿ.	2011	
City	State	Zip Code		Transac	tion ID : SB2	3 6162	
SILVER SPRINGS	FL	34489		11411540	JDZ.	J.U I UZ	
Purpose of Disbursement Contribution			044				
Candidate Name			011	Amount o	Each Disbur	sement thi	is Perio
Candidate Hame			Category/ Type			25	500.00
Office Sought:	ment For: 20	12	Турс		7	,	
Senate	Primary	General					
President	Other (specif	y) <b>▼</b>					
State: FL District: 06							
				-			
SUBTOTAL of Disbursements This Page (optional)			·····•			85	500.00
							-
TOTAL This Period (last page this line number only)	)				- (II) - II - II - I		

SCHEDULE B (FEC Form 3)		FOR LINE	E NUMBER: PAGE 58 OF 65				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one)				
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b				
A section and the section of the sec							
Any information copied from such Reports a or for commercial purposes, other than using							
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NEUR	OLOGICAL SURGEONS POLITIC	AL ACTION CC	DMMITTEE (NEUROSURGERYPAC)				
Full Name (Last, First, Middle Initial)							
A. FRIENDS OF JEB HENSAR	LING		Date of Disbursement				
Mailing Address PO BOX 820504			11 09 2011				
City	State Zip Code		Transaction ID : SB23.6139				
DALLAS	TX 75382		Transaction ib . 3D23.0133				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2500.00				
FRIENDS OF JEB HENSAR		Type	2500.00				
Office Sought: House Senate President	Disbursement For: 2012  ☐ Primary ☐ General  Other (specify) ▼						
State: TX District: 05							
Full Name (Last, First, Middle Initial)							
B. FRIENDS OF JEB HENSAR	LING		Date of Disbursement				
Mailing Address PO BOX 820504			12 08 7 2011				
City DALLAS	State Zip Code TX 75382		Transaction ID : SB23.6128				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name FRIENDS OF JEB HENSAR	LING	Category/ Type	2500.00				
	Disbursement For: 2012	71	,				
Senate	Y Primary General						
State: TX District: 05	Other (specify) ▼						
Full Name (Last, First, Middle Initial)  C. FRIENDS OF SCOTT DESJ	ADLAIC		Date of Disbursement				
• FRIENDS OF SCOTT DESI	ARLAIS		M M / D D / Y Y Y Y				
Mailing Address P O BOX 90133			12 08 2011				
City	State Zip Code		Transaction ID : SB23.6131				
NASHVILLE Purpose of Disbursement	TN 37209						
Contribution		011	Amount of Each Disbursement this Period				
Candidate Name	14 D1 410	Category/	2000.00				
FRIENDS OF SCOTT DESJ		Type	2000.00				
Senate President	Disbursement For: 2012  Primary General  Other (specify)						
State: TN District: 04							
I .							
SUBTOTAL of Disbursements This Page (o	ptional)	·····•	7000.00				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 59 OF 65
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or use		
or for commercial purposes, other than using the na	ime and address of any politic	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
AMERICAN ASSOCIATION OF NEUROLOG	CAL SURGEONS POLITICA	AL ACTION CC	OMMITTEE (NEUROSURGERYPAC)
Full Name (Last, First, Middle Initial)			
A. LANCE FOR CONGRESS			Date of Disbursement
ENTITION OF THE CONTROL			M M / D D / Y Y Y Y
Mailing Address PO BOX 225			10 13 2011
City	State Zip Code		
COLONIA	NJ 07067		Transaction ID : SB23.6146
Purpose of Disbursement			
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Office Sought:	ement For: 2012	Туре	
Senate	Primary General		
President	Other (specify) ▼		
State: NJ District: 07			
Full Name (Last, First, Middle Initial)			Date of Disbursement
B. LINCOLN PAC			M M / D D / Y Y Y Y
Mailing Address 3701 CONNECTICUT AVE #404			09 22 2011
City	State Zip Code DC 20008		Transaction ID : SB23.6154
WASHINGTON Purpose of Disbursement	DC 20008		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
000		Type	1000.00
Office Sought: House Disburs Senate	ement For: 2011 Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
C. LONE STAR LEADERSHIP PAC			Date of Disbursement
Mailing Address 7315 WISCONSIN AVENUE			11 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUITE 310 EAST			11 03 2011
City	State Zip Code		Transaction ID : SB23.6141
BETHESDA Purpose of Disbursement	MD 20814		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each dispursement this Period
		Type	2500.00
	ement For: 2011		
Senate President	Primary		
State: District:	Other (specify)		
Side Side Side Side Side Side Side Side			
SUBTOTAL of Disbursements This Page (optional)			4500.00
3 (4)			

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 60 OF 65
ITEMIZED DISBURSEMENTS	Use separate sched for each category of	f the	•	
	Detailed Summary F		22 X 23 28b	24 25 26 28c 29 30
Any information conical from such Departs and Other	monto movemat ha anti-			
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)		·		
AMERICAN ASSOCIATION OF NEUROLOGIC	CAL SURGEONS POL	LITICAL ACTION CO	OMMITTEE (NEUROS	URGERYPAC)
Full Name (Last, First, Middle Initial)			Data of Distance	
A. KEVIN MCCARTHY			Date of Disburseme	
Mailing Address PO BOX 12667			11 09	2011
5				
•	State Zip Code	,	Transaction ID : S	R23 6173
BAKERSFIELD	CA 93389		. Transaction ib . O	D23.0173
Purpose of Disbursement Contributions		011	Amount of Each Dis	bursement this Period
Candidate Name			Amount of Lacif Dis	Saloomoni tino 1 61100
		Category/ Type		2000.00
Office Sought: House Disburse	ment For: 2011			
Senate	Primary Sen	eral		
President	Other (specify) ▼			
State: CA District: 22				
Full Name (Last, First, Middle Initial)  B. Murphy For Congress			Date of Disburseme	nt
B. Murphy For Congress			Date of Dispulseme	/ Y Y Y Y Y
Mailing Address PO Box 24551			12 08	2011
,	State Zip Code		Transaction ID : S	B23.6176
Pittsburgh Purpose of Disbursement	PA 15234			
Contribution		011	Amount of Each Dis	bursement this Period
Candidate Name		Category/		
		Type		2500.00
	ment For: 2012	•		
	Primary Gen	eral		
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. NATIONAL REPUBLICAN CONGI	RESSIONAL CO	MMITTEE	Date of Disburseme	nt
- WATTOWNE RELIGIOUS	(LOOIOIV/L OC		M M / D D	/ Y = Y = Y = Y
Mailing Address 320 FIRST STREET SE			09 22	2011
	<u> </u>			
City WASHINGTON	State Zip Code DC 20003		Transaction ID : S	B23.6155
Purpose of Disbursement			-	
Contribution		011	Amount of Each Dis	bursement this Period
Candidate Name		Category/		10000 00
		Type		10000.00
	ment For: 2011	oral		
Senate President	Primary	erai		
State: District:	onici (apocity) ▼			
SUBTOTAL of Disbursements This Page (optional)				14500.00
3 (4)				
TOTAL This Period (last page this line number only	)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 61 OF 65
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or us		
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
AMERICAN ASSOCIATION OF NEUROLOGI	CAL SURGEONS POLITICA	AL ACTION CO	MMITTEE (NEUROSURGERYPAC)
Full Name (Last, First, Middle Initial)			
A. ERIK PAULSEN			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address POBOX 44369			09 22 2011
City	State Zip Code		
EDEN PRAIRIE	MN 55344		Transaction ID : SB23.6151
Purpose of Disbursement			
Contribution		011	Amount of Each Disbursement this Period
Candidate Name ERIK PAULSEN		Category/	2500.00
	ment For: 2012	Туре	
Senate Seagni.	Primary General		
President	Other (specify) ▼		
State: MN District: 03			
Full Name (Last, First, Middle Initial)			Date of Dishurcament
B. ERIK PAULSEN			Date of Disbursement
Mailing Address P.O. BOX 44369			12 21 _ 2011 _
City	State Zip Code		Transaction ID : SB23.6153
EDEN PRAIRIE Purpose of Disbursement	MN 55347		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4500.00
ERIK PAULSEN		Туре	1500.00
	ment For: 2012 Primary General		
President	Other (specify)		
State: MN District: 03	- (-1: )/ <b>V</b>		
Full Name (Last, First, Middle Initial)			
C. REPUBLICAN NATIONAL COMM		Date of Disbursement	
Mailing Address 240 FIRST STREET OF		12 21 2011	
Mailing Address 310 FIRST STREET SE			12 21 2011
City	State Zip Code		Transaction ID : SB23.6171
WASHINGTON	DC 20003		11 alisaction iD . 3D23.01 / 1
Purpose of Disbursement Contribution		011	Assessed of Food Bills
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	15000.00
	ment For: 2011		
Senate	Primary General		
State: District:	Other (specify) ▼		
State. District.			
SUBTOTAL of Disbursements This Page (optional).			19000.00
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TOTAL This Period (last page this line number only	·)		

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	62 C	F 65	
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(check only one)						
			ummary Page	21b	22 28a	23 28b	24 28c	25 29	26 30b	
۸.	ny information copied from such Reports and Staten	ente may no	it he sold or us							
or	for commercial purposes, other than using the nam	e and addres	ss of any politic	cal committee to	solicit cor	ntributions fr	om such co	ommitte	96.	
	NAME OF COMMITTEE (In Full)									
$ \rangle$	AMERICAN ASSOCIATION OF NEUROLOGIC	AL SURGE	ONS POLITICA	AL ACTION CO	DMMITTE	(NEURO	SURGERY	PAC)		
$\angle$	Full Name /Last First Middle Initial			i						
Α.	Full Name (Last, First, Middle Initial)  SCALISE FOR CONGRESS				Date of	Disbursem	ent			
		JR CONGRESS						Y	Υ	
	Mailing Address PO BOX 23219				09	22		011		
	City	toto	Zin Codo							
	City S JEFFERSON	itate Zip Code LA 70183			Trans	action ID :	SB23.6156			
	Purpose of Disbursement									
	Contribution			011	Amount	of Each Di	sbursemen	t this P	eriod	
	Candidate Name			Category/				1000.	.00	
	SCALISE FOR CONGRESS  Office Sought:	ent For: 20	10	Туре		7	7	. 500.		
		Primary	General							
		Other (specif								
	State: LA District: 01		•							
_	Full Name (Last, First, Middle Initial)									
В.	SCHOCK FOR CONGRESS				Date of	Disbursem				
	Mailing Address PO Box 10555				M M M	09		011	Υ	
	Maning Address PO BOX 10000				- 11	09		J11	_	
			Zip Code		Trans	action ID :	SB23.6142			
	Peoria	IL	61612		114113					
	Purpose of Disbursement Contribution			011	Amount	of Each Di	sbursemen	t this P	eriod	
	Candidate Name			Category/		2. 20011 21		-		
				Type		-	-	1000	.00	
		ent For: 20								
	Senate Pri		General							
	State: District:	Other (specif	y) <b>▼</b>							
_	Full Name (Last, First, Middle Initial)									
C.	ALLYSON Y. SCHWARTZ				Date of	Disbursem	ent			
, LE 1 001 1. 0011W/1(1/2					M M	/ D D		Y	Υ	
	Mailing Address P.O. BOX 2232				09	22	2	011		
	City	tate	Zip Code							
		PA	19046		Trans	action ID :	SB23.6159			
	Purpose of Disbursement Contribution									
	Condidate Name			011	Amount	Amount of Each Disbursement this Period				
	Candidate Name			Category/ Type				1000.	.00	
	Office Sought:	ent For: 20	12	туре		7	7	-		
		Primary	General							
	President	Other (specif	y) <b>▼</b>							
_	State: PA District: 13									
					_			3000.	00	
L	SUBTOTAL of Disbursements This Page (optional)			·····•		7	7	3000.	00	
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SCHEDULE B (FEC Form 3X)	Han arment	all a / - \	FOR LINE	NUMBER:		PAGE	63 OF	- 65
ITEMIZED DISBURSEMENTS	Use separate sched for each category of		(check only one)		704	105 -		
	Detailed Summary		21b 27	22 28a	X 23 28b	24 28c	25 29	26 30
Any information copied from such Reports and State	ments may not be sold	d or used b						
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)		_				_		
AMERICAN ASSOCIATION OF NEUROLOGI	CAL SURGEONS PO	DLITICAL A	CTION CO	MMITTEE	(NEUROS	URGERY	PAC)	
Full Name (Last, First, Middle Initial)			ı					
A. STIVERS FOR CONGRESS				Date of	Disburseme	nt		
							YY	
Mailing Address 4679 Winterset Drive				09	22	20	011	4
City	State Zip Code	e				D00 0454		
Columbus	OH 43220			Transa	ction ID : S	B23.6161		
Purpose of Disbursement Contribution			011	Amount	of Each Dis	hursement	this Pa	eriod
Candidate Name				ranount	or Edon Bio	bursemen		Jilou
		0.	ategory/ Type		7	-	2000.0	00
	ment For: 2012							
Senate Yeresident	Primary Ger Other (specify) ▼	neral						
State: OH District: 15	Other (apochy) ▼							
Full Name (Last, First, Middle Initial)								
B. TIM BISHOP FOR CONGRESS				Date of	Disburseme	nt		
				M = M	/ D D		044	
Mailing Address PO Box 437				07	14	2	011	_
City	State Zip Code	е		Transa	ction ID : S	B23.6164		
Farmingville Purpose of Disbursement	NY 11738	1						
Contribution			011	Amount	of Each Dis	bursement	this Pe	eriod
Candidate Name		Ca	ategory/				2500.0	20
			Туре		7	-	2500.0	JU
	ment For: 2012 Primary Ger	neral						
President	Other (specify)	ncial						
State: District:	(-							
Full Name (Last, First, Middle Initial)								
C. TIM BISHOP FOR CONGRESS					Disburseme			
Mailing Address PO Box 437				12 08 2011				
City	State Zip Code	е		Transa	ction ID : S	B23.6134		
Farmingville Purpose of Disbursement	NY 11738							
Contribution			011	Amount	of Each Dis	bursement	t this Pe	eriod
Candidate Name		C	ategory/			223311	-	
TIM BISHOP FOR CONGRESS	. =		Туре		7		2500.0	JU
Office Sought: House Disburse Senate	ment For: 2012 Primary Ger	neral						
President	Other (specify)	neral						
State: District:	Salor (opooliy)							
								-
SUBTOTAL of Disbursements This Page (optional).							7000.0	00
TOTAL This Period (last page this line number only	")			1	(B) II I		1 (0)	

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 64 OF 65			
ITEMIZED DISBURSEMENTS	Use separate schedule( for each category of the	(check only one)					
	Detailed Summary Page		22 X 23 28b	24 25 26 28c 29 30			
Any information copied from such Reports and Stater	ments may not be sold or						
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
AMERICAN ASSOCIATION OF NEUROLOGIC	CAL SURGEONS POLITI	CAL ACTION CO	MMITTEE (NEUROS	SURGERYPAC)			
/							
Full Name (Last, First, Middle Initial)			Date of Disburseme	ent			
A. TOM REED FOR CONGRESS			M M / D D	/ <b>Y Y Y Y</b>			
Mailing Address PO BOX 450			12 08 2011				
-	_						
,	State Zip Code NY 14564		Transaction ID : S	6B23.6135			
VICTOR Purpose of Disbursement	NY 14564						
Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/					
TOM REED FOR CONGRESS		Type		1000.00			
	ment For: 2012						
	Primary General						
State: NY District: 29	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. VERN BUCHANAN FOR CONGRI	FSS		Date of Disburseme	ent			
		M = M / D = D	/				
Mailing Address P. O. BOX 48928			07 14	2011			
0.	0						
City SARASOTA	State Zip Code FL 34230		Transaction ID: S	SB23.6165			
Purpose of Disbursement	57250						
Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/		2000.00			
00000		Type	7	2000.00			
	ment For: 2012						
Senate President	Primary General Other (specify) ▼						
State: FL District: 13	Caron (opoonly)						
Full Name (Last, First, Middle Initial)							
C. VOICE FOR FREEDOM			Date of Disburseme	ent			
			M M / D D	/			
Mailing Address 2814 Spring Road, Ste. 103			12 08	2011			
City	State Zip Code						
Atlanta	GA 30339		Transaction ID : S	B23.6138			
Purpose of Disbursement							
Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/		2500.00			
Office Sought: House Disburser	ment For: 2011	Type	7	7			
Senate Disburser	Primary Seneral						
President	Other (specify)						
State: District:	· · · · · · · · · · · · · · · · · · ·						
SUBTOTAL of Disbursements This Page (optional)				5500.00			
· · · · · · · · · · · · · · · · · · ·		<u>-</u>					
TOTAL This Period (last page this line number only)	)						

SCHEDULE B (FEC Form 3X)	C Form 3X)		NUMBER: PAGE 65 OF 65				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	TVO MBETT.				
I I LIVIIZED DISBURSEIVIEN I S	for each category of the	21b	22 🗶 23 24 25 26				
	Detailed Summary Page	27	28a 28b 28c 29 30b				
Any information copied from such Reports and State	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions				
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
$ \; angle$ AMERICAN ASSOCIATION OF NEUROLOGIC	AL SURGEONS POLITICAL	L ACTION CO	MMITTEE (NEUROSURGERYPAC)				
<u>/</u>							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. VOLUNTEERS FOR SHIMKUS	VOLUNTEERS FOR SHIMKUS						
Mailing Address B.O. Barress			11 09 2011				
Mailing Address P.O. Box 5458 PO BOX 5458							
	State Zip Code						
Springfield	IL 62705		Transaction ID: SB23.6145				
Purpose of Disbursement							
Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
000		Туре	1000.00				
	nent For: 2012						
Senate President	Other (specify) — General						
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B.			Date of Disbursement				
			M = M / D = D / Y = Y = Y				
Mailing Address	Mailing Address						
City	State Zip Code						
Purpose of Disbursement	<u> </u>						
i dipose oi Dispuisement	Purpose of Dispursement						
Candidate Name		Cota	Amount of Each Disbursement this Period				
		Category/ Type					
Office Sought: House Disburser	nent For:						
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)							
C.			Date of Disbursement				
Mailing Address	ailing Addrage						
Mailing Address							
City	State Zip Code						
•	,						
Purpose of Disbursement	Purpose of Disbursement						
-			Amount of Each Disbursement this Period				
Candidate Name	7	Category/					
Office Cought	and Fam	Туре					
Office Sought: House Disburser Senate							
Senate President	Primary General Other (specify) ▼						
State: District:	other (apoully) ▼						
2.0							
SUBTOTAL of Disbursements This Page (optional)			1000.00				
		·····					
TOTAL This Period (last page this line number only		_	70000.00				